Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY	
TC	OTAL CLAIMS			33			}	RATE	FEE	7	RATE	FEE
FO)R		NUMBER		NUME	BER EXTRA	1	BASIC FEE	385.00	OR	BASIC FEE	770.00
то	OTAL CHARGEA	ABLE CLAIMS	33 mir	√ 5 minus 20=		<i>[</i> 3]	X\$ 9=		OR	X\$18=	234
INE	DEPENDENT CL	LAIMS	3 mi	inus 3 =	*	-0-]	X43=		OR	X86=	
MU	ILTIPLE DEPEN	NDENT CLAIM PI	RESENT]	+145=		OR	-	_
* If	the difference	e in column 1 is	less than ze	ero, enter	"0" in c	column 2	ı	TOTAL		OR	TOTAL	1004
	· C	LAIMS AS A	MENDEC) - PAR	TII					4	OTHER	THAN
		(Column 1)		(Colum		(Column 3)	<u> </u>	SMALL		OR	SMALL E	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=] [X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	2: 2184	=] [X43=		OR	X86=	
	FIRST PHESE	ENTATION OF MU	JLTIPLE DEF	ENDENT	CLAIM] [+145=		OR	+290=	
							L	TOTAL		┨╗╏	TOTAL ADDIT. FEE	
		(Column 1)		(Colum	nn 2)	(Column 3)		ADDIT. FEE			ADDII. FEE	
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	EST BER DUSLY	PRESENT EXTRA	$\Big]\Big[$	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=] [X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	- C: AINA	=	4 [X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=	
							A	TOTAL ADDIT. FEE	·	OR A	TOTAL ADDIT. FEE	
		(Column 1)		(Colum		(Column 3)				_		
ENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	BER OUSLY	PRESENT EXTRA	$\Big] \Big[$	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Z.	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	1
AME	Independent	*	Minus	***	31 4194	-	IF	X43=		OR	X86=	
	FIRST PHESE	NTATION OF MU	ILTIPLE DEP	ENDENT	CLAIM]	+145=		OR	+290=	
** If	If the "Highest Nun	mn 1 is less than the mber Previously Pa	aid For" IN THIS	S SPACE is	less than	n 20, enter "20."	. A	TOTAL DDIT. FEE			TOTAL ADDIT. FEE	
		mber Previously Pa ober Previously Paid							ropriate box	in cok	umn 1.	